



ABN: 23 676 617 704
ARBN: 162 610 228

c/o Injury Division
The George Institute for Global Health
PO Box M201, Missenden Rd, NSW 2050 AUSTRALIA

AIPN EXECUTIVE COMMITTEE NOMINATION FORM - 2018

To be completed by the Nominator and Seconder

I, being a current financial member of the Australian Injury Prevention Network (AIPN) hereby nominate:

(Name of Nominee)

For the position of: *(Please tick [✓] the appropriate box[es] below)*

President

General Committee Members (2 Vacancies)

NZ Representative (Maori)

NZ Representative (General)

Aboriginal & Torres Strait Islander Representative

NOTES:

1. A person may be nominated for more than one position but can only be elected to one position.
2. Only current financial members may nominate a candidate or be nominated for the Executive Committee or Office Bearing positions
3. Only the delegated representative of an organizational member may nominate candidates or be nominated for the Executive Committee or Office Bearing positions
4. Only current financial members can vote on resolutions or for committee nominees - see Clause 5.3 of the AIPN Constitution.

1. _____ Date: _____
(Name of Nominator)

Signature of Nominator: _____

I, being a current financial member of the Australian Injury Prevention Network (AIPN), hereby second the nomination

2. _____ Date: _____
(Name of Seconder)

Signature of Seconder: _____

TO BE COMPLETED BY NOMINEE

I, _____
(Name of Nominee)

being a current financial member of the Australian Injury Prevention Network (AIPN), hereby accept the nomination:

Date: _____
(Signature of Nominee)

Please return completed forms to the AIPN Secretariat: secretariat@aipn.com.au by **Thursday 22nd November 2018**